

ARKANSAS SOIL AND WATER CONSERVATION COMMISSION
101 EAST CAPITOL AVENUE, SUITE 350
LITTLE ROCK, ARKANSAS 72201
(501) 682-1611

APPLICATION FOR TAX INCENTIVES UNDER ARKANSAS SOIL AND WATER CONSERVATION COMMISSION RULES TITLE XIV:
"RULES IMPLEMENTING THE WATER RESOURCE CONSERVATION AND DEVELOPMENT INCENTIVES ACT."

Revised October 20, 2000. PLEASE DISCARD ALL OLD FORMS.

PLEASE PRINT OR TYPE

Name of farm, business, trust, corporation, partnership, etc.:

Landowner(s)/partners/shareholders (List names taxpayers claiming credit and nature of ownership--individual, corporation, partnership, Subchapter S, etc.) Continue on back if necessary. (If partners or shareholders have resolved to distribute the credits in a manner other than by % of ownership, attach a copy of the resolution authorizing such a distribution.)

1.			
	Name	Title	Percentage of Ownership
	Address	Telephone	FAX
			FEIN/Social Security No.
2.			
	Name	Title	Percentage of Ownership
	Address	Telephone	FAX
			FEIN/Social Security No.
3.			
	Name	Title	Percentage of Ownership
	Address	Telephone	FAX
			FEIN/Social Security No.
4.			
	Name	Title	Percentage of Ownership
	Address	Telephone	FAX
			FEIN/Social Security No.
5.			
	Name	Title	Percentage of Ownership
	Address	Telephone	FAX
			FEIN/Social Security No.
6.			
	Name	Title	Percentage of Ownership
	Address	Telephone	FAX
			FEIN/Social Security No.

Continue on back if necessary.

Project contact person

Name	Address
Telephone	FAX

Type of project proposed – PLEASE CHECK ONLY ONE

- ☐ Impoundment (50% credit)
- ☐ Conversion (10% credit **OUTSIDE** and 50% **INSIDE** a critical ground water area)
- ☐ Leveling (10% credit)

If this is a conversion project, please indicate whether it is inside or outside a critical groundwater area

- ☐ **OUTSIDE** a critical groundwater area (10% credit)
- ☐ **INSIDE** a critical groundwater area (50% credit)

Will you be ☐ Creating a new project ☐ Enlarging an existing project

Estimated tax credit

Estimated total cost of project EXCLUDING ANY COST SHARING \$ _____

Multiply by percentage of credit: x _____ %

Estimated tax credit: \$ _____

Amount enclosed for application fee as enacted by the 1995 Legislature (3% of the estimated tax credit with a minimum fee of \$100 required with a maximum of \$1,500.00)

Estimated tax credit : \$ _____ x 3% = \$ _____ application fee
(Please make check payable to the Arkansas Soil and Water Conservation Commission.)

Please attach plans and specifications to the application NOTE: PLEASE ATTACH A USGS MAP SHOWING PROPERTY LINES; THE EXACT LOCATION OF THE PROJECT, ROADS, AND UTILITIES; AND OUTLINES OF ANY IMPOUNDMENTS, WATERSHEDS, OR DAMS.

Plans developed by: (This person must be a registered professional engineer licensed in Arkansas or an agent of the USDA-NRCS.)

Name	Address	
Telephone	FAX	Registration number

Legal description of project site

_____ 1/4 of the _____ 1/4, Section _____, Township _____, Range _____

all in the County of _____ containing _____ acres, more or less.

IMPOUNDMENTS

NOTE: New projects must impound a minimum of 20 acre-feet, and enlargements of existing structures must increase capacity by a minimum of 20 acre-feet.

1. The name of the stream (if any) on which the structure will be built is _____, and is a tributary of _____, within the _____ basin.
2. Capacity of reservoir at normal pool level _____ acre-feet
3. Surface area of reservoir at normal pool level _____ acres.

NOTE: If the height of the dam is 25 feet or more, and if the capacity of the reservoir at spillway #1 at the normal pool level is 50 acre-feet or more, A DAM PERMIT IS REQUIRED. Contact the Dam Safety section of the Soil and Water Commission at (501) 682-3958 to obtain a permit application.

IMPOUNDMENTS OR GROUND TO SURFACE WATER CONVERSIONS

1. Indicate the major uses of water from the project by approximate percentages
_____% Municipal _____% Industrial _____% Domestic _____% Livestock
_____% Irrigation _____% Aquaculture _____% Other _____
2. Estimated amount of water to be withdrawn per year from the project _____ acre-feet
3. Maximum withdrawal rate _____ ☐ (cfs) ☐ (gpm)

ALL PROJECTS

Estimated total acre-footage of groundwater used in the year prior to filing this application or to be used in the current year _____.

Estimated annual acre-footage groundwater usage after completion of project _____.

CERTIFICATION

The _____ Conservation District has examined this application and has determined that:

The plans have been incorporated into the landowner's conservation plan; or
The plans are in conformity with accepted soil and water conservation practices.

Chairman

Date

Applicant	Applicant
Applicant	Applicant
Applicant	Applicant
Applicant	Applicant

VERIFICATION

STATE OF ARKANSAS)
) ss
COUNTY OF _____)

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public

My Commission Expires:

(S E A L)

Commission approval granted on _____, _____.

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